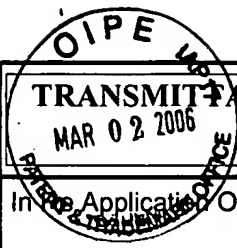


TFW



TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c))	Docket No. STD00.01CIPD
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In the Application Of: **SYSTEM AND METHOD FOR JOINT RESURFACE REPAIR**

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/618,887	July 14, 2003		32047	3732	

Title: **SYSTEM AND METHOD FOR JOINT RESURFACE REPAIR**

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

37 CFR 1.97(b)

1. ☒ The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.

37 CFR 1.97(c)

2. ☐ The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:
- ☐ the statement specified in 37 CFR 1.97(e);
- OR**
- ☐ the fee set forth in 37 CFR 1.17(p).

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
STD00.01CIPD

In Re Application of: **SYSTEM AND METHOD FOR JOINT RESURFACE REPAIR**

MAR 02 2006

Application No. 10/618,887	Filing Date July 14, 2003	Examiner	Customer No. 32047	Group Art Unit 3732	Confirmation No.
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Title: **SYSTEM AND METHOD FOR JOINT RESURFACE REPAIR**

Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of _____ is attached.
- ☐ The Director is hereby authorized to charge and credit Deposit Account No. _____ as described below.
- ☐ Charge the amount of _____
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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April Davis Typed or Printed Name of Person Mailing Certificate	

Dated: February 27, 2006

Edmund P. Pfleger
Attorney for Applicants
Reg. No. 41,252

CC:

**INFORMATION DISCLOSURE CITATION**

(Use several sheets if necessary)

Docket Number (optional)

STD00.01CIPD

Application No.

10/618,887

Applicants(s)

TALLARIDA, et al

Filing Date

July 14, 2003

Group Art Unit

3732

U.S. PATENT APPLICATION PUBLICATIONS

*Examiner Initial	REF	DOCUMENT NUMBER	DATE	NAME	CLASS/SUBCLASS	FILING DATE IF APPROPRIATE
		US 2005/0015153	1/20/2005	GOBLE ET AL	623/23.46	
		US 2005/0143831	6/30/2005	JUSTIN ET AL	623/20.17	
		US 2005/0143731	6/30/2005	JUSTIN ET AL	606/53	
		US 2006/0004461	1/5/2006	JUSTIN ET AL	623/20.34	
		US2005/0143745	6/30/2005	HODOREK ET AL	606/87	

U.S. PATENT DOCUMENTS

*Examiner Initial	REF	DOCUMENT NUMBER	DATE	COUNTRY	CLASS/SUBCLASS	TRANSLATION	
						YES	NO

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)

		ATOS NEWS, October 2005, "The Artificial Limb "Eclipse" – A new draft without shank in the implantation of artificial shoulder limbs", cover page w/pgs. 40-41, with English translation dated 1/13/06 (2 pgs).

EXAMINER

DATE CONSIDERED

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include Copy of this form with next communication to applicant